# AGENCY ANNUAL PROGRAM PERFORMANCE REPORT FOR PATBI

REPORTING PERIOD FROM October 1, 2008 TO September 30, 2009
STATE: Indiana
AGENCY NAME: Indiana Protection and Advocacy Services
DATE SUBMITTED:12/4/2009

#### **AGENCY INFORMATION**

Agency Name: Indiana Protection and Advocacy Services

**Address of Agency:** 

a. Main Office:

4701 N. Keystone Ave., Suite 222 Indianapolis, Indiana 46205

- b. Satellite Office(s) (if applicable):
- c. Contract Office(s) (if applicable):

Agency Telephone Number: 317-722-5555

Agency Toll-Free Telephone Number: 1-800-622-4845

Agency TTY Number: 317-722-5563

Agency Toll-Free TTY Number: 1-800-838-1131

Agency Fax Number: 317-722-5564

Agency E-Mail Address: info@ipas.IN.gov

Agency Web Address: www.IN.gov/ipas

**Executive Director Name: Thomas Gallagher** 

Executive Director Email: tgallagher@ipas.in.gov

Staff Preparing Report Name: Sue Beecher

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Staff Preparing Report Office Location: 4701 N. Keystone Ave., Suite 222, Indianapolis, IN.

46205

### PART I: NON-CASE SERVICES

# A. INFORMATION AND REFERRAL SERVICES (I&R)

1. Total Individuals Receiving I&R Services	39
2. Total Number of I&R requests during the Fiscal Year	42

#### **B. TRAINING ACTIVITIES**

Number of Trainings Presented by Staff	27
2. Number of Individuals Who Attended These Trainings	3704

- 3. Describe at least two (2) trainings presented by the staff. Be sure to include information about the topics covered, the purpose of the training, and a description of the attendees.
  - a) Brain Injury Association of Indiana Annual Conference Two of the annual conferences sponsored by the Brain Injury Association of Indiana occurred during this past fiscal year. During the 2008 conference, 225 individuals were in attendance. IPAS was a sponsor, manned an agency information booth, and assisted as a moderator for a session on problem and resolution identification. The 2009 Conference had 260 attendees. One of the keynote speakers was former World Wrestling Entertainment wrestler and author Mr. Chris Nowinski. Mr. Nowinski received his degree from Harvard where he also played college football. His successful wrestling career was cut short in 2003 when he experienced "postconcussion syndrome" during a match. A year later he still was experiencing symptoms and was forced to retire from the sport of wrestling. He has since authored the book, "Head Games: Football Concussion Crisis" and founded the Sports Legacy Institute with the purpose to focus research on sports concussions. This year's conference also provided a "survivor's track" with presentations and training focused on individuals with traumatic brain injury and their specific needs. IPAS was a sponsor, manned an agency information booth, and presented as a member of two different panels for the survivors.
  - b) The Governor's Conference for People with Disabilities was held on 12/1 and 12/2/08 with 455 individuals were in attendance. IPAS was a sponsor and manned an agency information booth. The Governor's Conference is the largest conference for individuals with disabilities within the state of Indiana. The attendees represented all disability categories.

### 4. Agency Outreach

Describe the agency's outreach efforts to previously unserved or underserved individuals including minority communities.

Outreach to unserved or underserved individuals including minority communities has included an ongoing project with Indiana's Guardian Ad Litem/Court Appointed Special Advocate (GAL/CASA) program to develop a training module regarding children with disabilities.

Other outreach has focused on transition aged students. To that end staff have participated in thirteen school transition fairs reaching 1,630 students, parents, and educators.

## C. INFORMATION DISSEMINATED TO THE PUBLIC

1. Radio and TV Appearances by Agency Staff	0
2. Newspaper/Magazine/Journal Articles Prepared by Agency Staff	0
3. PSAs/Videos Aired by the Agency	0
4. Website Hits	64633
5. Publications/Booklets/Brochures Disseminated by the Agency	17581*

\*PATBI brochures (English and Spanish) 1,412 Impact newsletter 11,109 Agency wide brochures and booklets 3,038 Toll free resource guide 2,022

### 6. Other

Ī	Number	Description (use separate sheets if necessary)
	0	

7. External Media Coverage of Agency Activities

Radio/TV Coverage	Newspaper/ Magazines/Journal	PSAs/Videos	Publications/ Booklets/Brochures
0	0	0	0

# PART II: CASE-SERVICES

# A. INDIVIDUALS SERVED

1. Individuals	
a. Individuals Served Receiving Advocacy at Start of Fiscal Year (carryover from prior)	1
b. Additional Individuals Served During Fiscal Year (new for fiscal year)	8
c. Total Number of Individuals Served During Fiscal Year (a + b)	9
d. Total Number of Individuals with Cases that Were Closed During Fiscal Year	6
e. Total Individuals Still Being Served at the End of the Fiscal Year	3

2. Services	
a. Number of Cases/Service Requests Open at Start of Fiscal Year (carryover from prior)	1
b. Additional Cases/Service Requests Opened During Fiscal Year (new for fiscal year)	8
c. Total Number of Cases/Service Requests During Fiscal Year (a + b)	9
d. Total Number of Cases/Service Requests that Were Closed During Fiscal Year	6
e. Total Number of Cases/Service Requests Open at the End of the Fiscal Year	3

# B. PROBLEM AREAS/COMPLAINTS OF INDIVIDUALS SERVED

Complaint	
1. Abuse (total)	2
a. Inappropriate Use of Restraint & Seclusion	1
b. Involuntary Treatment	0
c. Physical, Verbal, & Sexual Assault	0
d. Other	1
2. Access to Records	0
3. Advance Directives	0
4. Architectural Accessibility	2
5. Assistive Technology (total)	1
a. Augmentative Comm. Devices	0
b. Durable Medical Equipment	1
c. Vehicle Modification/Transportation	0
d. Other	0
6. Civil Commitment	0
7. Custody/Parental Rights	0
8. Education (total)	0
a. FAPE: IEP/IFSP Planning/Development/Implementation	0
b. FAPE: Discipline/Procedural Safeguards	0
c. FAPE: Eligibility	0
d. FAPE: Least Restrictive Environ.	0
e. FAPE: Multi-disciplinary Evaluation/Assessments	0
f. FAPE: Transition Services	0
g. Other	0

9. Employment Discrimination (total)	0
a. Benefits	0
b. Hiring/Termination	0
c. Reasonable Accommodations	0
d. Service Provider Issues	0
e. Supported Employment	0
f. Wage and Hour Issues	0
g. Other	0
10. Employment Preparation	0
11. Financial Benefits (total)	0
a. SSDI Work Incentives	0
b. SSI Eligibility	0
c. SSI Work Incentives	0
d. Social Security Benefits Cessation	0
e. Welfare Reform	0
f. Work Related Overpayments	0
g. Other Financial Entitlements	0
12. Forensic Commitment	0
13. Government Benefits/Services	0
14. Guardianship/Conservatorship	1
15. Healthcare (total)	2
a. General Healthcare	1
b. Medicaid	0
c. Medicare	0
d. Private Medical Insurance	0
e. Other	1
16. Housing (total)	0
a. Accommodations	0
b. Architectural Barriers	0
c. Landlord/Tenant	0
d. Modifications	0
e. Rental Denial/Termination	0
f. Sales/Contracts/Ownership	0
g. Subsidized Housing/Section 8	0
h. Zoning/Restrictive Covenants	0
L	

i. Other	0
17. Immigration	0
18. Neglect (total)	1
a. Failure to Provide Necessary or Appropriate Medical Treatment	0
b. Failure to Provide Necessary or Appropriate Mental Health Treatment	1
c. Failure to Provide Necessary or Appropriate Personal Care & Safety	0
d. Other	0
19. Post-Secondary Education	0
20. Non-Medical Insurance	0
21. Privacy Rights	0
22. Rehabilitation Services (total)	0
a. Communications Problems (Individuals/Counselor)	0
b. Conflict About Services To Be Provided	0
c. Individual Requests Information	0
d. Non-Rehabilitation Act	0
e. Private Providers	0
f. Related to Application/Eligibility Process	0
g. Related to IWRP Development/Implementation	0
h. Related to Title I of ADA	0
i. Other Rehabilitation Act-related problems	0
23 Suspicious Death	0
24. Transportation (total)	0
a. Air Carrier	0
b. Paratransit	0
c. Public Transportation	0
d. Other	0
25. Unnecessary Institutionalization	0
26. Voting (total)	0
a. Accessible Polling Place / Equipment	0
b. Registration	0
c. Other	0
27. Other*	0

<sup>\*</sup>For any cases listed under "27. Other," describe the specific problem area or complaint and the number of cases covered under each problem area or complaint listed. Use separate sheets if necessary.

## C. REASONS FOR CLOSING CASE FILES

# 1. Reason for Closing Case Files

1. Reason for Closing Case Files	
Reason	
a. All Issues Resolved in Client's Favor	3
b. Some Issues Resolved in Client's Favor	2
c. Other Representation Obtained	0
d. Individual Withdrew Complaint	0
e. Services Not Needed Due to Death, Relocation, etc.	0
f. Individual Not Responsive to Agency	0
g. Case Lacked Legal Merit	1
h. Conflict of Interest	0
i. Agency Withdrew from Case	0
j. Lack of Resources	0
k. Not Within Priorities	0
I. Issue Not Resolved in Client's Favor	0
m. Other*	0
n. Total	6

\*For any cases listed under "Other," describe the reason for closing the case and the number of cases covered under each reason listed. Use separate sheets if necessary.

# D. HIGHEST INTERVENTION STRATEGY

Interventions	
1. Short Term Assistance	2
2. Systemic/Policy Activities	0
3. Investigation/Monitoring	3
4. Negotiation	0
5. Mediation/Alternative Dispute Resolution	1
6. Administrative Hearing	0
7. Legal Remedy/Litigation	0
8. Class Action Suits	0

## PART III: STATISTICAL INFORMATION FOR INDIVIDUALS SERVED

### A. AGE OF INDIVIDUALS SERVED

Age	
0 to 12	1
13 to 18	1
19 to 25	0
26 to 64	7
65 and over	0
Total	9

# B. GENDER OF INDIVIDUALS SERVED

Male	7
Female	2
Total	9

## C. RACE/ETHNICITY OF INDIVIDUALS SERVED

Race/Ethnicity	
1. American Indian/Alaskan Native	0
2. Arab American	0
3. Asian	0
4. Black/African American	0
5. Hispanic/ Latino	1
6. Native Hawaiian/Other Pacific Islander	0
7. White/Caucasian	7
8. Multiracial/Multiethnic	1
9. Race/Ethnicity Unknown	0
10. Other Than Above*	0
11. Total	9

\*For any individuals listed under "Other Than Above," describe the race/ethnicity of the individual and the number of cases covered under each description listed. Use separate sheets if necessary.

# D. LIVING ARRANGEMENTS OF INDIVIDUALS SERVED

Arrangement	
1. Community Residential Home	1
2. Foster Care	0
3. Homeless/Shelter	0
4. Legal Detention/Jail/Prison	2
5. Nursing Facility	1
6. Parental/Guardian or Other Family Home	1
7. Independent	4
8. Private Institutional Setting	0
9. Public (State Operated) Institutional Setting	0
10. Public Housing	0
11. VA Hospital	0
12. Other*	0
13. Unknown/Not Provided	0

<sup>\*</sup>For any cases listed under "Other," describe the living arrangement of the individual and the number of cases covered under each description listed.

## **E. GEOGRAPHIC LOCATION**

Geographic Location				
1. Urban/Suburban	3			
2. Rural	6			
3. Total	9			

## PART IV: SYSTEMIC ACTIVITIES AND LITIGATION

### A. SYSTEMIC ACTIVITIES

Non-Litigation Systemic Activities	
2. Describe the agency's systemic activities. Be sure to include information policies that were changed and how these changes benefit individuals with possible, estimate the number of individuals potentially impacted by such p Also include at least three case examples of how the agency's systemic actimpacted individuals served.	disabilities. If olicy changes.
N/A	
B. LITIGATION/CLASS ACTIONS	
Total Number of Non-Class Action Lawsuits Filed	0
a. Number of Non-Class Action Lawsuits Filed During Fiscal Year (new for fiscal year)	0
b. Number of Non-Class Action Lawsuits Filed at Start of Fiscal Year (carryover from prior fiscal year)	0
2. Total Number of Class Action Lawsuits Filed	0
a. Number of Class Action Lawsuits Filed During Fiscal Year (new for fiscal year)	0
b. Number of Class Action Lawsuits Filed at Start of Fiscal Year (carryover from prior fiscal year)	0
3. Describe the agency's litigation/class action activities. Explain how individualities benefited from such litigation. If possible, estimate the number of potentially impacted by changes resulting from the litigation. Be sure to incomplete the case examples that demonstrate the impact of the agency's litigation.  N/A	of individuals

## C. MONITORING

Describe any monitoring conducted by the agency by providing the major areas of non-litigation-related monitoring activities and the groups likely to be affected. Address the major outcomes of the monitoring activities during the fiscal year. Be sure to include at least three case examples that demonstrate the impact of the agency's monitoring activities.

LITIGATION-RELATED MONITORING  Describe any monitoring conducted by the agency related settlements by providing the major areas of monitoring at affected. Address the major outcomes of the litigation-re fiscal year. Be sure to include at least three case example impact of the agency's litigation-related monitoring.	nd the groups likely to be lated monitoring during tl
N/A	
Describe any full investigations conducted by the agency	
	ress the major outcomes de at least three case
Describe any full investigations conducted by the agency of investigation and the groups likely to be affected. Add the investigations during the fiscal year. Be sure to inclu examples that demonstrate the impact of the agency's investigations.	ress the major outcomes de at least three case restigations. Use separat
of investigation and the groups likely to be affected. Add the investigations during the fiscal year. Be sure to inclu examples that demonstrate the impact of the agency's invested if necessary.	ress the major outcomes de at least three case restigations. Use separat
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Describe any full investigations conducted by the agency of investigation and the groups likely to be affected. Add the investigations during the fiscal year. Be sure to inclu examples that demonstrate the impact of the agency's invesheets if necessary.  N/A  DEATH INVESTIGATIONS	ress the major outcomes de at least three case restigations. Use separat
Describe any full investigations conducted by the agency of investigation and the groups likely to be affected. Add the investigations during the fiscal year. Be sure to inclu examples that demonstrate the impact of the agency's invesheets if necessary.  N/A  DEATH INVESTIGATIONS  I. Number of Formal Death Reports Received	ress the major outcomes de at least three case restigations. Use separat
Describe any full investigations conducted by the agency of investigation and the groups likely to be affected. Add the investigations during the fiscal year. Be sure to inclu examples that demonstrate the impact of the agency's invested if necessary.	ress the major outcomes de at least three case restigations. Use separated

### PART V: PRIORITIES AND OBJECTIVES

#### A. CURRENT PRIORITIES AND OBJECTIVES

Use the format below to describe the program priorities and objectives toward which the prior fiscal year's activities were targeted.

#### Priority #1:

Review five (5) allegations of abuse and neglect on behalf of individuals with traumatic brain injuries to ensure that the allegation is reported to the responsible entities and advocate that necessary actions are taken to protect the health, safety and welfare of individuals with disabilities.

## **Description of Need, Issue, or Barrier Addressed:**

Individuals with traumatic brain injury are susceptible to abuse and neglect.

## Indicator(s):

Individuals with traumatic brain injury will be free of abuse and neglect.

Outcome:	Met X	Partially	Met/Continuing	Not Met	_	
Total Num	ber of C	ases Han	dled			5

#### Illustrative Cases (at least one specific case description showing the success)

"Roy" is a seventeen year old who experienced a severe traumatic brain injury after being thrown from a vehicle during an automobile accident which occurred in 2004. Roy experienced residual disabilities from this accident including bipolar disorder, epilepsy, and ongoing impulsivity for which he received Wellbutrin and Seroquel. Roy had received mental health therapy sporadically since the accident. During the latter part of 2008, Roy stole items and was arrested for this activity shortly before Christmas of 2008. He was placed in the juvenile detention center but had also been admitted to the local mental health center due to suicide ideation on three occasions prior to his mother contacting IPAS in February of 2009. Roy's mother explained that he was not receiving either his medications or therapeutic counseling as needed while in the juvenile center. Roy's mother also explained that she felt the judge would sentence her son to a facility where he would be unable to receive the counseling he needed for his mental health disorders.

The assigned Advocate reviewed the juvenile center's policies and procedures pertaining to medication administration and mental health treatment. Roy was seen by a mental health professional once a week. He had access to a high school counselor on staff at the facility but did not avail himself of those services. A local hospital provides a mobile team to evaluate homicidal/aggressive/suicidal behavior and Roy was seen by this team on three occasions when he expressed suicidal ideation. Roy received inpatient services on three occasions and each time he was discharged, the hospital recommended that he continue in outpatient treatment which documentation verified did occur. Roy's

medications were adjusted and changed during each hospitalization and the detention center followed through in providing these to him as ordered. The detention center did follow their policies and procedures as outline in regards to mental health treatment and medication administration.

The Advocate made contact with Roy's public defender and determined that three options were being considered for Roy's sentencing none of which would meet his mental health needs. IPAS met with the public defender and the probation officer to inform them of Roy's mental health treatment needs. IPAS' activities convinced the public defender, probation officer, and juvenile judge to release Roy to his mother who is to be aware of his whereabouts at all times, enroll him in school, and ensure he remained in counseling. IPAS also referred Roy to his local Vocational Rehabilitation Counselor who is also a Traumatic Brain Injury specialist to complete an application for services. Roy is now receiving his needed medications and counseling services.

# **Priority #2:**

Review allegations of discrimination on behalf of three (3) individuals with traumatic brain injury who have been denied services under the ADA Title 2 and 3, or Fair Housing Act and take appropriate action.

## Description of Need, Issue, or Barrier Addressed:

Individuals with traumatic brain injury are denied services under the ADA Titles 2 and 3 as well as the Fair Housing Act.

#### Indicator(s):

Individuals with traumatic brain injury will receive services as needed and required under the ADA Titles 2 and 3 as well as the Fair housing Act.

Outcome:	Met	Partially	/ Met/Continuing	_X	Not Met	
Total Numl	ber of Cas	es Handle	ed			2

### Illustrative Cases (at least one specific case description showing the success)

"Mike" is a thirty-five year old individual who experienced a traumatic brain injury due to involvement in an automobile accident. On 2/6/09, Mike contacted IPAS with a concern regarding accessibility to handicapped parking spaces at a local hospital and grocery store, both of which he utilized frequently. The assigned Advocate spoke with Mike and made certain that she understood his issues. While Mike's original issues appeared focused on violations of the Americans with Disabilities Act fact finding revealed that this was not the case. Sufficient parking spots designated for individuals with disabilities existed at both businesses however individuals who did not possess handicapped license plates or hang tags were parking illegally in the spaces designated for those who were truly disabled. Mike had been able to advocate for himself in regards to the local hospital which agreed to increase their monitoring of the handicapped parking spaces. The Advocate did speak with officials at the local grocery store and advocated for

increased monitoring of handicapped parking spots to prevent individuals who are not disabled from parking in them. The assigned Advocate also discussed and provided copies of specific requirements within the Americans with Disabilities Act (ADA) to assure that he understood his rights. Overall the Advocate's efforts raised awareness of this issue among businesses identified in Mike's complaint and he reports that he has been able to consistently access handicapped parking at the local hospital.

# Priority #3:

Review allegations on behalf of three (3) students where the school, due to a proposed or instituted change of educational placement or suspension or expulsion, has or will reduce educational services and advocate for the restoration of services provided in the least restrictive environment.

#### **Description of Need, Issue, or Barrier Addressed:**

Students with traumatic brain injury do not always receive their right to a Free and Appropriate Public Education (FAPE).

#### Indicator(s):

Students with traumatic brain injury will receive FAPE as required under Individuals with Disabilities Act Improvement Act (IDEAIA) and Indiana's Article 7.

Outcome:	Met	Partially Met/Continuing	_ Not Met	_X	
<b>Total Numb</b>	per of Ca	ses Handled			0
Illustra	tive Case	s (at least one specific case d	escription s	howi	ng the success)
		N/A			

## Priority #4:

Increase awareness of school staff responsible for identifying students with disabilities about the characteristics of pediatric traumatic brain injury.

#### Description of Need, Issue, or Barrier Addressed:

School personnel who are responsible for identifying students with disabilities are not always aware of the signs, symptoms, and characteristics of traumatic brain injury and therefore do not accurately identify students with traumatic brain injury.

## Indicator(s):

The number of students identified as having traumatic brain injury within the school system will increase.

Outcome:	Met	Partially	/ Met/Continuing X	Not Met	
Total Numb	per of Cas	ses Handle	ed		

IPAS has partnered with the Brain Injury Association of Indiana to distribute a training curriculum developed by Ms. Kathleen Munroe, a speech and language therapist who works on the pediatric traumatic brain injury unit at Methodist Hospital in Indianapolis. This training curriculum, "Traumatic Brain Injury: A Training Program for School Personnel in Indiana" will be reproduced on CD and distributed to all 180 special education cooperatives within the state of Indiana.

# Priority #5:

- a) Provide information about traumatic brain injuries and disability rights to those entities serving individuals with traumatic brain injury.
- b) Assist the Brain Injury Association of Indiana (BIAI) in planning and sponsoring the annual BIAI conference.

## Description of Need, Issue, or Barrier Addressed:

Individuals with traumatic brain injury need information and referral services as well as technical assistance to access services.

## Indicator(s):

- a) IPAS has printed brochures describing the services of the PATBI and BIAI in English, Spanish, and Braille. These have been distributed to all of the brain injury support groups in the state as well as to all participants in conferences in Indiana focusing on individuals with disabilities. IPAS assisted in the updating of the Brain Injury Resource Guide which was printed and is also included on the BIAI website at www.bia.org/Indiana/. Forty-two service requests for information and referral services were responded to this past grant year.
- b) IPAS sponsored both of the annual BIAI conferences this past year.

Outcome: Met _X Partially Met/Continuing Not Met			
Total Number of Cases Handled	N/A		
Illustrative Cases (at least one specific case description showing the success)			
N/A	<del> </del>		
<del></del>			

#### **B. AGENCY ACCOMPLISHMENTS**

Describe the most significant accomplishments of the agency during the fiscal year.

IPAS attended a meeting of the Brain Injury Advisory Council on 2/11/2009, as well as the IN. TBI Implementation and Partnership Grant Conference on 3/10/2009 to summarize the activities completed within the past three years under the federal grant obtained from the Health Resources Services Administration (HRSA). Indiana has been selected as one of only twelve grant recipients for the next three year grant which will again be administered through Indiana Vocational

Rehabilitation Services to the Rehabilitation Hospital of Indiana which will implement the designated activities. IPAS supported this and sent a letter of support for the grant in December of 2008. IPAS will now serve as a member of the Indiana Brain Injury Leadership Board.

#### C. IMPLEMENTATION PROBLEMS

Describe any external or internal implementation problems for priorities marked "not met" or "partially met."

IPAS will complete some outreach activities within the next grant year to generate additional educational and physical access service requests. Outreach on the Americans with Disabilities Act and individual's rights under this law will be developed and provided to the state's independent case management company and area agencies on aging. Both of these agencies provide case management services to individuals with traumatic brain injury. This information will also be provided to brain injury support groups, and Indiana Vocational Rehabilitation Counselors state-wide.

IPAS will copy the newly developed brain injury training curriculum for educators, "Traumatic Brain Injury: A Training Program for School Personnel in Indiana" onto CDs and these will be distributed to all special education cooperatives within the state.

#### PART VI: AGENCY ADMINISTRATION

#### A. GRIEVANCES FILED

PATBI grievances filed against the agency during the fiscal year	0
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# **B. COLLABORATIVE EFFORTS**

#### 1. NETWORK COLLABORATION

Identify issues selected for network collaboration.

IPAS will collaborate with the Brain Injury Association of Indiana and Indianapolis Public Schools in the coming year to train staff and increase the identification of students with traumatic brain injury. IPAS agreed to pay for the copying of CD's containing "Traumatic Brain Injury: A Training Program for School Personnel in Indiana". These will be distributed to every special education cooperative in Indiana during October of 2009. IPAS will continue to support the BIAI in the planning and implementation of their 2010 annual conference.

#### 2. ALL OTHER COLLABORATION

Describe any coordination with programs that are not part of the agency (e.g. state long-term care programs, etc.). Use separate sheets if necessary.

IPAS continues to work with other state agencies and entities including Indiana Vocational Rehabilitation Services, Rehabilitation Hospital of Indiana, Brain Injury Leadership Group, and brain injury support groups.

### PART VII: END OF FORM

Signature	Date
Name (printed)	Title